



## 2018 Elite Skills ID Camp

High School Players – October 13<sup>th</sup>

The UW-La Crosse Baseball Program would like to invite current high school players to join our coaching staff and players in a one-day camp designed to test and enhance your skills in preparation for a potential future in college baseball. This camp is for high school players who have a desire to play college baseball, wish to learn what college coaches look for, test measurable skills, and prepare for a future in baseball.

- WHO:** High School Players (Grades 9-12)
- WHEN:** Saturday, October 13<sup>th</sup>
- TIMES:**
- |                        |                |                                   |
|------------------------|----------------|-----------------------------------|
| Infielders/Outfielders | 12:00 – 3:00pm | <i>*end times are approximate</i> |
| Catchers               | 1:00 – 4:00pm  |                                   |
| Pitchers               | 3:00 – 5:00pm  |                                   |
- WHERE:** UWL Campus Field  
855 East Ave North  
La Crosse, WI 54601
- COST:** \$100 for Infielders/Outfielders/Catchers  
\$100 for Pitchers  
\$175 for registering as both pitcher and position player
- INCLUDED:** Performance T-shirt
- WHAT TO BRING:** Please wear baseball attire (baseball pants, hat, spikes, turfs/tennis shoes)  
Bring own equipment (catchers gear, glove/mitt, bat)
- REGISTRATION:** Please register in advance at: [www.uwlcamps.com](http://www.uwlcamps.com)  
OR by filling out the registration form and sending it in.
- WHAT TO EXPECT:** Measurable testing: 60yd sprint, velocity from positions, exit velocity,  
Catcher pop times/velocity, pitcher velocity, home to 1B  
Pitchers bullpens. College level instruction/feedback. Skill evaluation for all players

Visit [uwlcamps.com](http://uwlcamps.com) for online registration, printable registration, and more information!



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## UW-La Crosse Baseball

**Date:** October 13, 2018

**Times:** Infielders/Outfielders 12:00 – 3:00pm \*end times are approximate  
Catchers 1:00 – 4:00pm  
Pitchers 3:00 – 5:00pm

**Grades:** High School (grades 9-12)

**Costs:** \$100 for Infielders/Outfielders/Catchers  
\$100 for Pitchers  
\$175 registering as both pitcher & position player

*Please print clearly. We cannot process incomplete registrations. All information must be provided.*

Player Name \_\_\_\_\_ High School \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Player phone \_\_\_\_\_ Player Email \_\_\_\_\_

Parent/Guardian (emergency contact) \_\_\_\_\_ Parent/Guardian Phone \_\_\_\_\_

For Pitchers (circle one): RHP LHP For Position Players (circle one): Infielder Outfielder Catcher

Registering as (circle one): Pitcher \$100 Infielder/Outfielder \$100 Catcher \$100 Pitcher & Position Player \$175

Amount Enclosed: \$ \_\_\_\_\_

Check enclosed, made payable to: **UW-La Crosse**

Return to:

**UW-La Crosse Athletic Camps & Clinics**

**149 Mitchell Hall**

**1725 State St.**

**La Crosse, WI 54601**

If you have any questions, please contact Assistant Coach Scott Gillitzer by e-mail at: [sgillitzer@uwlax.edu](mailto:sgillitzer@uwlax.edu)

**WAIVER:** Registration implies permission for photos, publicity and inclusion in a participant list unless camp director is notified in writing prior to camp. By signing this form I agree to hold harmless and indemnify UW-La Crosse, their officers, agents, and employees from any and all liability, loss, damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of my dependent in the course of the camp. I authorize that any medical, surgical, diagnostic and hospital procedures may be performed by a physician on my dependent if I cannot be reached in the event of an emergency.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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